

- [What's In The Health Reform Bill For You Right Away?](#)

On March 23, 2010 President Obama signed the [health insurance reform bill into law](#) that will ensure all Americans have access to quality, affordable health care and significantly reduce long-term health care costs.

Many key provisions take effect this year - here are some of them:

IF YOU ARE A SMALL BUSINESSES OWNER:

SMALL BUSINESS TAX CREDITS—Offers tax credits to small businesses to make employee coverage more affordable. Tax credits of up to 35 percent of premiums will be immediately available. Effective beginning for calendar year 2010. (Beginning in 2014, small business tax credits will cover 50 percent of premiums.)

IF YOU ARE A SENIOR:

BEGINS TO CLOSE THE MEDICARE PART D DONUT HOLE—Provides a \$250 rebate to Medicare beneficiaries who hit the donut hole in 2010. Effective for calendar year 2010. (Beginning in 2011, institutes a 50% discount on brand-name drugs in the donut hole; also completely closes the donut hole by 2020.)

FREE PREVENTIVE CARE UNDER MEDICARE—Eliminates co-payments for preventive services and exempts preventive services from deductibles under the Medicare program. Effective beginning January 1, 2011.

HELP FOR EARLY RETIREES—Creates a temporary re-insurance program (until the

Exchanges are available) to help offset the costs of expensive health claims for employers that provide health benefits for retirees age 55-64. Effective 90 days after enactment.

IF YOU HAVE PRIVATE HEALTH INSURANCE:

NO DISCRIMINATION AGAINST CHILDREN WITH PRE-EXISTING CONDITIONS—Prohibits health plans from denying coverage to children with pre-existing conditions. Effective 6 months after enactment. (

Beginning in 2014, this prohibition would apply to adults
as well.)

NO RESCISSIONS—Bans health plans from dropping people from coverage when they get sick. Effective 6 months after enactment.

NO LIFETIME LIMITS ON COVERAGE—Prohibits health plans from placing lifetime caps on coverage. Effective 6 months after enactment.

NO RESTRICTIVE ANNUAL LIMITS ON COVERAGE—Tightly restricts new plans' use of annual limits to ensure access to needed care. These tight restrictions will be defined by HHS. Effective 6 months after enactment. (Beginning in 2014, the use of any annual limits would be prohibited for all plans.)

FREE PREVENTIVE CARE UNDER NEW PLANS—Requires new private plans to cover preventive services with no co-payments and with preventive services being exempt from deductibles. Effective 6 months after enactment.

NEW, INDEPENDENT APPEALS PROCESS FOR NEW PLANS—Ensures consumers in new plans have access to an effective internal and external appeals process to appeal decisions. Effective 6 months after enactment.

MORE FOR YOUR PREMIUM DOLLAR—Requires plans to put more of your premiums into your care, and less into profits, CEO pay, etc. This medical loss ratio requires plans in the individual and small group market to spend 80 percent of premiums on medical services, and plans in the large group market to spend 85 percent. Insurers that don't meet these thresholds must provide rebates to policyholders. Effective on January 1, 2011.

NO DISCRIMINATION BASED ON SALARY—Prohibits new group health plans from establishing any eligibility rules for health care coverage that have the effect of discriminating in favor of higher wage employees. Effective 6 months after enactment.

IF YOU DON'T HAVE HEALTH INSURANCE:

IMMEDIATE HELP FOR THE UNINSURED WITH PRE-EXISTING CONDITIONS (INTERIM HIGH-RISK POOL)—Provides immediate access to insurance for Americans who are uninsured because of a pre-existing condition - through a temporary high-risk pool – until the Exchanges up and running in 2014. Effective 90 days after enactment. (Beginning in 2014, health plans are banned from discriminating against all people with pre-existing conditions, so high-risk pools would phase out).

EXTENDING COVERAGE FOR YOUNG PEOPLE UP TO 26TH BIRTHDAY THROUGH PARENTS' INSURANCE – Requires health plans to allow young people up to their 26th birthday to remain on their parents' insurance policy, at the parents' choice. Effective 6 months after enactment.

GENERAL REFORMS:

COMMUNITY HEALTH CENTERS—Increases funding for Community Health Centers to allow for nearly doubling the number of patients served over the next 5 years. Effective beginning in fiscal year 2010.

MORE PRIMARY CARE DOCTORS—Provides new investment in training programs to increase the number of primary care doctors, nurses, and public health professionals. Effective

beginning in fiscal year 2010.

HEALTH INSURANCE CONSUMER ASSISTANCE—Provides aid to states to establish offices of health insurance consumer assistance to help consumers file complaints and appeals. Effective beginning in FY 2010.

A NEW, VOLUNTARY, PUBLIC LONG-TERM CARE INSURANCE PROGRAM—Creates a long-term care insurance program to be financed by voluntary payroll deductions to provide benefits to adults who become functionally disabled. Effective on January 1, 2011.

And in 2014, once the [exchanges](#) have formed, more insurance reforms go into effect, including:

NO DISCRIMINATION AGAINST ADULTS WITH PRE-EXISTING CONDITIONS

BAN ON HIGHER PREMIUMS FOR WOMEN

PREMIUMS BASED ON AGE CAN ONLY VARY BY A MAXIMUM OF 3-TO-1 RATIO

CAP ON OUT-OF-POCKET EXPENSES for private health plans

[Learn more by reading the implementation timeline»](#)